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CONFIRMATION NO. 3964

<b>SERIAL NUMBER</b> 10/664,422	<b>FILING OR 371(c) DATE</b> 09/17/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1649	<b>ATTORNEY DOCKET NO.</b> GOUD:023USD3
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**APPLICANTS**  
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*DK 8/16/06*

**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a DIV of 09/718,355 11/24/2000 which claims benefit of 60/167,623 11/26/1999  
*DK 8/16/06*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
*NONE*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
 \*\* 11/26/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 21	<b>TOTAL CLAIMS</b> 9	<b>INDEPENDENT CLAIMS</b> 2
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35 USC 119 (a-d) conditions ☐ yes ☒ no ☐ Met after met  
 Verified and Acknowledged *James G. Gaudin* *DK*  
 Examiner's Signature Initials

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**TITLE**  
 Loci for idiopathic generalized epilepsy, mutations thereof and method using same to assess, diagnose, prognose or treat epilepsy

<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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